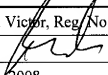


<b>TRANSMITTAL FORM</b>	Application Number	09/513,859
<i>(To be used for all correspondence after initial filing)</i>	Filing Date	February 28, 2000
	Inventor	N.D. BARRET et al.
	Group Art Unit	3626
	Examiner Name	Vanel Frenel
	Attorney Docket Number	SJO000031US1

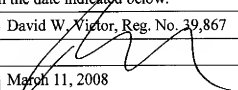
**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> Preliminary <input type="checkbox"/> Supplemental <input type="checkbox"/> After Final <input type="checkbox"/> Rule 312 <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement: ___ references <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawings: ___ Replacement Sheets <input type="checkbox"/> Petition for Corrected Notice of Recordation <input type="checkbox"/> Petition for Corrected Filing Receipt <input type="checkbox"/> Petition: _____ <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Statement Under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Comments on Statements of Reasons for Allowance	<input type="checkbox"/> Certificate of Correction of Applicant's Mistake (37 CFR 1.323) <input type="checkbox"/> Certificate of Correction of Office Mistake (37 CFR 1.322) <input type="checkbox"/> Notice of Appeal <input type="checkbox"/> Pre-Appeal Brief Request for Review <input type="checkbox"/> Appeal Brief <input type="checkbox"/> Status Letter/ Status Request <input checked="" type="checkbox"/> Issue Fee Transmittal Form <input checked="" type="checkbox"/> Fee Address Indication Form <input type="checkbox"/> Request for Duplicate/ Replacement Copy <input type="checkbox"/> Response to Notice of Non- Compliant Amendment
--	--	--

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual Name:	David W. Victor, Reg. No. 39,867
Signature:	
Date:	March 11, 2008
KONRAD RAYNES & VICTOR, LLP 315 South Beverly Dr., Suite 210 Beverly Hills, CA 90212 310-556-7983	The Commissioner is hereby authorized to charge to Deposit Account No. 09-0466 any additional fee required under 37 CFR 1.16 and 1.17, including all required extension of time fees or any other deficiency, and credit any overpayment to this deposit account.

**CERTIFICATE OF TRANSMISSION**

I hereby certify that this correspondence is being transmitted through the USPTO EFS-Web system over the Internet on the date indicated below.		
Typed or Printed Name:	David W. Victor, Reg. No. 39,867	Customer No. <b>46917</b>
Signature:		
Date:	March 11, 2008	